

**UNITED STATES BANKRUPTCY COURT**

**Southern District of New York**

**In re: Silicon Graphics Federal, Inc.**

**Case No.: 09-11702**

**Debtor**

**\*SUBJECT TO GENERAL AND SPECIFIC NOTES TO THESE SCHEDULES\***

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**AMENDED SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, C, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under Chapter 7, 11, or 13.

**AMOUNTS SCHEDULED**

| NAME OF SCHEDULE                                    | ATTACHED<br>(YES / NO) | NO. OF SHEETS | ASSETS       | LIABILITIES   | OTHER |
|---|------------------------|---------------|--------------|---------------|-------|
| A - REAL PROPERTY                                   | NO                     | 0             | \$0          |               |       |
| B - PERSONAL PROPERTY                               | NO                     | 0             | \$21,817,962 |               |       |
| C - PROPERTY CLAIMED AS EXEMPT                      | NO                     | 0             |              |               |       |
| D - CREDITORS HOLDING SECURED CLAIMS                | NO                     | 0             |              | \$162,439,270 |       |
| E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS     | YES                    | 2             |              | \$196,544     |       |
| F - CREDITORS HOLDING UNSECURED NON-PRIORITY CLAIMS | YES                    | 2             |              | \$6,465,707   |       |
| G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES        | NO                     | 0             |              |               |       |
| H - CODEBTORS                                       | NO                     | 0             |              |               |       |
| I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)          | NO                     | 0             |              |               | N/A   |
| J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)    | NO                     | 0             |              |               | N/A   |
| Total number of sheets of all Schedules             |                        | 4             |              |               |       |

Total Assets >

\$21,817,962

Total Liabilities >

\$169,101,521

## UNITED STATES BANKRUPTCY COURT

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DebtorCase No.: 09-11702

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**AMENDED SCHEDULE E - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME<br>AND MAILING<br>ADDRESS INCLUDING<br>ZIP CODE, AND<br>ACCOUNT NUMBER | CODEBTOR | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM | C U D  | AMOUNT OF<br>CLAIM |
|--|----------|--|--|--------------------|
| See Exhibit E-1 immediately<br>following Schedule E                                    |          | Tax Liabilities  | <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> | Undetermined       |
| See Exhibit E-2 following<br>Schedule E-1  |          | Employee Claims  | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                       | \$196,544          |
|  |          |  | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                       |                    |
|  |          |  | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                       |                    |
|  |          |  | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                       |                    |
|  |          |  |  |                    |

Total **\$196,544**

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**AMENDED SCHEDULE**

**Exhibit E-2  
Employee Claims**

| <b>Name</b>        | <b>Address</b>             | <b>City, State &amp; Zip</b>      | <b>C</b>                 | <b>U</b>                 | <b>D</b>                 | <b>Claim Amount</b> |
|--------------------|----------------------------|-----------------------------------|--------------------------|--------------------------|--------------------------|---------------------|
| Brenner,Jim        | 28622 Munera               | Mission Viejo, CA 92692 US        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Dubois,Stephen     | 116 Indian Spring Rd       | Concord, MA 01742 US              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Fuchigami,Harry    | 7839 Rockburn Drive        | Ellicott City, MD 21043 US        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Kerstens,Andre     | 112 W Cardiff Ct           | Newark, DE 19711 US               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Larson,Bryan       | 19672 Crestknoll Drive     | Yorba Linda, CA 92886 US          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Linares,Steven     | 6 Chateaux Circle          | Scarsdale, NY 10583 US            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Mason Jr.,John     | 3774 E. Viewcrest Dr.      | Salt Lake City, UT 84124 US       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Matta,Rich         | 651 Dahlia Drive           | Monroeville, PA 151461251 US      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| May,Kase           | 10525 Milam Road           | Black Forest, CO 80908 US         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$5,108             |
| McMurchie, Maureen | 2958 East Weaver Avenue    | Littleton, CO 80121 US            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Merrill,Cynthia    | P.O. Box 2794              | Saratoga, CA 95070 US             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Palmer,Bradley     | 14 East Street             | Hopkinton, MA 01748 US            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Pickett, Patricia  | 21200 Trumpet Dr #203      | Newhall, CA 91321 US              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Roberts,Shelley    | 2937 S. Zeno Way           | Aurora, CO 80013 US               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$5,997             |
| Torres,Robert      | 100 Via Palestra           | Palos Verdes Estates, CA 90274 US | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Umina,Sherry       | 8035 S Mountain Oaks Drive | Salt Lake City, UT 84121 US       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| VanDegrift,George  | 11052 Bridgepointe NE      | Albuquerque, NM 87111 US          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$469               |
| Wilson,Chan        | 3844 Coyt Road             | Cottage Grove, WI 53527 US        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| Wood,Justin        | 407 Steep Mountain Drive   | Draper, UT 84020 US               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$9,770             |
| Zelsnack,William   | 7195 Horseshoe Road        | Colorado Springs, CO 80923 US     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$10,950            |
| <hr/>              |                            |                                   |                          |                          |                          | <b>\$196,544</b>    |

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**AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedule D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP<br>CODE AND ACCOUNT<br>NUMBER | CODEBTOR | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | C                        | U                        | D                                   | AMOUNT OF<br>CLAIM |
|--|----------|---|--------------------------|--------------------------|-------------------------------------|--------------------|
|  |          |   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                    |
| See Exhibit F-1 immediately following Schedule F                                   |          | Accounts Payable  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | \$1,117,161        |
| See Exhibit F-2 immediately following Exhibit F-1                                  |          | Intercompany Liabilities  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | \$5,111,197        |
| See Exhibit F-3 immediately following Exhibit F-2                                  |          | Unsecured Employee Liabilities  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | \$237,349          |
|  |          |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                    |
|  |          |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                    |
|  |          |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                    |
|  |          |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                    |
|  |          |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                    |

**Total                    \$6,465,707**

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**AMENDED SCHEDULE**

**Exhibit F-4**

**Unsecured Employee Liabilities**

| <b>Name</b>        | <b>Address</b>   | <b>C</b>                 | <b>U</b>                 | <b>D</b>                 | <b>Claim<br/>Amount</b> |
|--------------------|--|--------------------------|--------------------------|--------------------------|-------------------------|
| Brenner,Jim        | 28622 Munera Mission Viejo, CA 92692 US                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$25,439                |
| Dubois,Stephen     | 116 Indian Spring Rd Concord, MA 01742 US              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$5,471                 |
| Fuchigami,Harry    | 7839 Rockburn Drive Ellicott City, MD 21043 US         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$20,969                |
| Kerstens,Andre     | 112 W Cardiff Ct Newark, DE 19711 US                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$5,446                 |
| Larson,Bryan       | 19672 Crestknoll Drive Yorba Linda, CA 92886 US        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$15,667                |
| Linares,Steven     | 6 Chateaux Circle Scarsdale, NY 10583 US               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$62,761                |
| Mason Jr.,John     | 3774 E. Viewcrest Dr. Salt Lake City, UT 84124 US      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$9,444                 |
| Matta,Rich         | 651 Dahlia Drive Monroeville, PA 151461251 US          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$8,832                 |
| McMurchie, Maureen | 2958 East Weaver Avenue Littleton, CO 80121 US         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$4,802                 |
| Merrill,Cynthia    | P.O. Box 2794 Saratoga, CA 95070 US                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$19,263                |
| Palmer,Bradley     | 14 East Street Hopkinton, MA 01748 US                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$6,235                 |
| Pickett, Patricia  | 21200 Trumpet Dr #203 Newhall, CA 91321 US             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$15,366                |
| Torres,Robert      | 100 Via Palestre Palos Verdes Estates, CA 90274 US     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$14,979                |
| Umina,Sherry       | 8035 S Mountain Oaks Drive Salt Lake City, UT 84121 US | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$9,388                 |
| Wilson,Chan        | 3844 Coyt Road Cottage Grove, WI 53527 US              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$7,457                 |
| Zelsnack,William   | 7195 Horseshoe Road Colorado Springs, CO 80923 US      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$5,829                 |
| <hr/>              |  |                          |                          |                          | <b>\$237,349</b>        |
| <hr/>              |  |                          |                          |                          |                         |

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**DECLARATION CONCERNING DEBTOR'S AMENDED SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the Secretary of the Corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing amended summary and schedules, consisting of 5 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: April 29, 2009

Signature: 

Kent Randolph, Secretary

*Penalty for making a false statement: Fine of up to \$500,000, or imprisonment for up to 5 years, or both. 18 U.S.C. § 152 and 3571.*